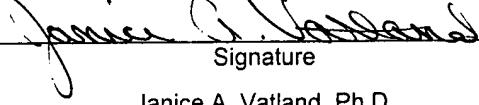




<b>PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)</b> <b>FY 2005</b> <b>(Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)</b>		Docket Number (Optional) H0535.70013US00
Application Number 10/031,833-Conf. #5763		Filed July 22, 1999
For LINKAGE OF AGENTS TO TISSUE		
Art Unit 1651	Examiner	D. M. Naff
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.		
The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):		
<input type="checkbox"/> One month (37 CFR 1.17(a)(1))	Fee \$120	Small Entity Fee \$60
<input type="checkbox"/> Two months (37 CFR 1.17(a)(2))	Fee \$450	Small Entity Fee \$225
<input checked="" type="checkbox"/> Three months (37 CFR 1.17(a)(3))	Fee \$1020	Small Entity Fee \$510
<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	Fee \$1590	Small Entity Fee \$795
<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	Fee \$2160	Small Entity Fee \$1080
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.		10/10/2006 HDEMESS1 00000006 10031833
<input checked="" type="checkbox"/> A check in the amount of the fee is enclosed.		02 FC:1253
<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.		1020.00 OP
<input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account.		
<input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>23/2825</u> . I have enclosed a duplicate copy of this sheet.		
I am the <input type="checkbox"/> applicant/inventor.		
<input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).		
<input checked="" type="checkbox"/> attorney or agent of record. Registration Number <u>52,318</u>		
<input type="checkbox"/> attorney or agent under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34		
 Signature		
Oct 4, 2006 Date		
Janice A. Vatland, Ph.D. Typed or printed name		
(617) 646-8000 Telephone Number		
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.		
<input type="checkbox"/> Total of <u>1</u> forms are submitted.		

x10.04.06

<b>Certificate of Mailing Under 37 CFR 1.8(a)</b>	
I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being deposited with the U.S. Postal Service on the date shown below with sufficient postage as First Class Mail, in an envelope addressed to: Mail Stop RCE, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.	
Dated: October 4, 2006	
 Nipple Millette Hawes	